

PART B - FEE(S) TRANSMITTAL



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7590 04/06/2006

Boyd D. Cox
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<i>Boyd D. Cox</i>	(Depositor's name)
<i>Boyd D. Cox</i>	(Signature)
L. 30-06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/724,538	11/26/2003	Steven S. Conrad	1103APC	1853
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TITLE OF INVENTION: SEATING/STORAGE ADD-ON SECTION WITH HOLSTER FOR SHOPPING CART

07/07/2006 CNGUYEN1 00000018 10724538

01 FC:2501 700.00 OP
 02 FC:1504 300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	YES	\$700	\$300	\$1000	07/06/2006
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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CAMPBELL, KELLY E	3618	280-033993
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 *Boyd D. Cox*

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Assembled Products Corporation Rogers, AR

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Boyd D. Cox

Date _____

6. 30.06

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Boyd D. Cox

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27, 120

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